☐ Initial Application ☐ Amended Application Date: 4/15/2020



COMMITTEE ID NUMBER (office use only)

DISTS-2010-02

N.8 4-15-2020 3pm

COMMITTEE TYPE (choose one):

| irst or last name & office) | Jack Hastings for District 5 Council |
|---|--|
| Candidate Information: | Candidate's Name (required): Jack Hastings |
| | Candidate's mailing address (required): 16485 N Stadium Way Unit 334, Surprise A |
| | Candidate's email address (required): |
| | Candidate's phone number (required): (480) 3/8 -0397 |
| | Candidate's website (if any): jackfor surprise.com |
| Office Sought (choose one): | □ Governor □ Secretary of State □ Attorney General □ State Treasurer □ Superintendent of Public Instruction □ State Mine Inspector □ Corporation Commissioner |
| | ☐ State Senate ☐ State House of Representatives ☐ District (required): |
| | ☐ County Office: ☐ District (if applicable): |
| | ■ City/Town Office: City Council ■ District (if applicable): 5 |
| The Alien Overla for Office 2 | |
| ection Cycle for Office Sou | ght (year the election will take place) (required): |
| Party Affiliation: (required for partisan offices) | □ Democrat □ Green □ Libertarian □ Republican □ Other: |
| ☐ Political Action Com | |
| Committee Name (required): if sponsored, must include sponsor's name) | |
| , | |
| | ☐ Contributions ☐ Candidate-Related Independent Expenditures |
| Political Function (optional): select any that apply) | ☐ Contributions ☐ Candidate-Related Independent Expenditures ☐ Ballot Measure Expenditures ☐ Recall Expenditures |
| Political Function (optional): | ☐ Ballot Measure Expenditures ☐ Recall Expenditures |
| Political Function (optional): select any that apply) Sponsorship Information: | ☐ Ballot Measure Expenditures ☐ Recall Expenditures |
| Political Function (optional): select any that apply) Sponsorship Information: | ☐ Ballot Measure Expenditures ☐ Recall Expenditures Sponsor's name or nickname (required): Sponsor's mailing address (required): |
| Political Function (optional): | ☐ Ballot Measure Expenditures ☐ Recall Expenditures Sponsor's name or nickname (required): Sponsor's mailing address (required): Sponsor's email address (required): |
| Political Function (optional): select any that apply) Sponsorship Information: | ☐ Ballot Measure Expenditures ☐ Recall Expenditures Sponsor's name or nickname (required): Sponsor's mailing address (required): Sponsor's email address (required): Sponsor's phone number (if any): |
| Political Function (optional): select any that apply) Sponsorship Information: | ☐ Ballot Measure Expenditures ☐ Recall Expenditures Sponsor's name or nickname (required): Sponsor's mailing address (required): Sponsor's email address (required): |
| Political Function (optional): select any that apply) Sponsorship Information: | □ Ballot Measure Expenditures □ Recall Expenditures Sponsor's name or nickname (required): Sponsor's mailing address (required): Sponsor's email address (required): Sponsor's phone number (if any): Sponsor's website (if any): |
| Political Function (optional): select any that apply) Sponsorship Information: if applicable) | ☐ Ballot Measure Expenditures ☐ Recall Expenditures Sponsor's name or nickname (required): Sponsor's mailing address (required): Sponsor's email address (required): Sponsor's phone number (if any): |

Arizona Secretary of State Revision 11/5/16

☐ Initial Application
☐ Amended Application
Date: 4/15/2020



COMMITTEE ID NUMBER (office use only)

DTSTS-2020-02

COMMITTEE INFORMATION:

| | Contact Information: | Committee's mailing address (required): 16485 N Stadium Way Unit 3134, Surprise, AZ 85374 |
|---|---|--|
| | | Committee's email address (required): jackforsurprise@gmail.com |
| | | Committee's phone number (if any): (480) 318-0397 |
| | | Committee's website (if any): jackforsurprise.com |
| | Chairperson's Information: | Chairperson's name (required): Jack Hastings |
| | Champerson's information. | Chairperson's physical address (required): 16485 N Stadium Way Unit 3134, Surprise, AZ 85374 |
| | | Chairperson's mailing address (if different): |
| | | Chairperson's email address (required): jackforsurprise@gmail.com |
| | | Chairperson's phone number (required): (480) 318-0397 |
| | | Chairperson's employer (required): Dysart Unified School District |
| | | Chairperson's occupation (required): Civics/Government Teacher |
| | Treasurer's Information: Bank or Financial Institution: (do not list acct numbers) | Treasurer's name (required): |
| | | Treasurer's physical address (required): 16485 N Stadium Way Unit 3134, Surprise, AZ 85374 |
| | | Treasurer's mailing address (if different): |
| | | Treasurer's email address (required): jackforsurprise@gmail.com |
| | | Treasurer's phone number (required): (480) 318-0397 |
| | | Treasurer's employer (required): Dysart Unified School District |
| | | Treasurer's occupation (required): Civics/Government Teacher |
| | | Bank name (required): Bank of America |
| | | Additional bank name (if applicable): |
| / | , | Additional bank name (if applicable): |
| | | |

DECLARATION AND SIGNATURES:

I declare under penalty of perjury that the foregoing information is true and correct. I further declare that I: (1) consent to serve as chairperson or treasurer of the committee named herein, if applicable; (2) designate the above-named committee as my official candidate committee and authorize it to receive/make contributions/expenditures on my behalf, if applicable; (3) have read the Secretary of State's campaign finance and reporting guide; (4) agree to comply with Arizona election law, including campaign finance laws codified at A.R.S. §§ 16-901 to 16-938; and (5) agree to accept all notifications and legal service of process for campaign finance purposes via the email address(es) provided herein.

Chairperson's signature:

Date: 4/15/2020

Date: 4/15/2020

Date: 4/15/2020

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